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## PEACE OFFICER INVOLVED INJURIES OR DEATH REPORT

As required by Art, 2.139 of the Texas Code of Criminal Procedure, law enforcement agencies shall report all officer-involved injuries or deaths caused by the discharge of a firearm. Pursuant to the requirements of Art. 2.139, the following reporting form has been created for reporting such incidents.

"Officer-involved injury or death" means an incident during which a peace officer discharges a firearm causing injury or death to another." Art 2.139 Code of Criminal Procedure

Email completed form to: officershootingreport@texasattorneygeneral.gov

DATE OF REPORT 05/01/2017			
AGENCY/FACILITY INFORMATION			
Name of Agency/Facility EL PASO POLICE DEPARTMENT	NT		
Address 911 N RAYNOR			
City EL PASO	Zip Code 79903		
Telephone Number (915) 212-4065			
Signature of Director of Agency/Facility (Required)	A/CH/K		
Name of Person Filling Out Form REX K. PARSONS			
Email of Person Filling Out Form 2581@elpasotexas.gov			
1. WHAT WAS THE INJURED OR DECEASED'S GENDER?	8. WHAT WAS THE PEACE OFFICER'S GENDER?		
Ø Male ☐ Female	Male Female		
2. WHAT WAS THE INJURED OR DECEASED'S AGE AT TIME OF INCIDENT?	9. WHAT WAS THE PEACE OFFICER'S AGE AT THE TIME OF THE INCIDENT?		
25 Not Available	32		
3. WHAT WAS THE INJURED OR DECEASED'S RACE/ETHNICITY? (Mark one based on information reported on state driver license application, state identification card application, or other government reported identification if available	10. WHAT WAS THE PEACE OFFICER'S RACE/ETHNICITY? (Mark only one)		
and known. If not available, mark not available.)	American Indian 🗸 Black or African American		
☐ American Indian ☐ Black or African American	or Alaska Native 🔲 Hispanic or Latino		
or Alaska Native 🖊 Hispanic or Latino	☐ Anglo or White ☐ Other		
☐ Anglo or White ☐ Other	Asian or Pacific Islander		
☐ Asian or Pacific Islander ☐ Not Available	11. DURING THE INCIDENT, PEACE OFFICER WAS:		
4. DATE OF INCIDENT	☐ On Duty ☐ Off Duty		
Month APRIL Day 19 Year 2017			
TIME: Hour 11 Min 54 AM 7 PM	12. PEACE OFFICER WAS RESPONDING TO CALL OR REQUEST WITH ONE OR MORE OFFICERS:		
5. LOCATION OF INCIDENT	✓ Yes □ No		
Street address 5400 POLLARD	13. INCIDENT OCCURRED DURING OR AS A RESULT OF A:		
City EL PASO	☐ Emergency Call or Request for Assistance		
County EL PASO Zip 79906	✓ Traffic stop		
	Execution of a warrant		
6. INCIDENT RESULTED IN: 🖊 Injury 🗆 Death	☐ Hostage, barricade, or other emergency situation		
7. INJURED OR DECEASED PERSON:	Other – Specify type of call		
Carried, exhibited or used a deadly weapon	a other openity type of oan		
Did not carry, exhibit or use a deadly weapon	2		